



Enrollment Package



5500 Main Street, Suite 300 Williamsville, NY 14221 **TLC Portal Link**

Phone: 716-266-6700 Fax: 716-276-3424

Web: www.targetedlending.com

Contact: www.targetedlending.com/contact-us

Submit Credit Applications to: credit@targetedlending.com

Submit Document Requests to:

documents@targetedlending.com



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www.targetedlending.com

Email or Fax completed BROKER APPLICATION to:

rhazard@targetedlending.com

 \mathbf{or}

mlawrence@targetedlending.com

BUSINESS INFORMATION						
Legal Company Name		Fed Tax ID		Years in Business		
DBA			State of Incorporation			
Company Address	City	Sta	te Z	Zip		
Website	Telephone	Fax	1			
Do you have a California Lenders License? ☐Yes ☐No						
PERSONAL INFORMATION (Owners	s, Members, Partners o	or Officers)				
<u>Principal 1 Name</u>		Title				
Home Address	City	Sta	te Z	Zip		
Cell Phone #	Email					
Social Security #		Ownership %				
Principal 2 Name		Title				
Home Address	City	Sta	te Z	Zip		
Cell Phone #	Email					
Social Security #	urity # Ow		Ownership %			
FUNDING SOURCE REFERENCES						
Funding Source	Contact Name		Contact Email	Contact Phone		
Funding Source	Contact Name		Contact Email	Contact Phone		
By signing below, the undersigned individual(s), who is/ar assignee or potential assignee) authorizing review of his credit profile from a national credit bureau and authorize extend to updating the credit profile as needed by T Signature below, I/we affirm my/our identity as the respec	s/her personal credit profile from s all requested bank and trade info argeted Lending Co., LLC. A	n a national credit bureau. ormation to be released via photo/fax copy of this a	. Such authorization shall telephone, fax, or email. S	extend to obtaining a uch authorization shall		
Signature Date	Sig	gnature	Date			
Printed Name	Pr	inted Name				
Title		tle				



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BROKER QUESTIONNAIRE

Please complete the following questions to complete the registration process.

PLEASE SELECT THE PRODUCTS YOU ARE CURRENTLY OFFERING YOUR CUSTOMERS:					
□EFA	☐Working Capital				
□ Lease □ Other □ Other □ Other □ Do you have more than 1 location for your business? Yes □ No □ If Yes, please list physical addresses:					
WHAT TOOLS DO YOU NEED TO EFFECTIVE	LY GENERATE AND CLOSE MORE BUSIN	JESS?			
TRANSACTION HISTORY					
Average number of deals <i>processed</i> monthly:	Average transaction size:				
Average number of deals <i>funded</i> monthly:					
Please list your Top 5 Industries	Please classify your annu	Please classify your annual deal flow by ticket size			
1	\$1,000 - \$50,000	%			
2	\$50,001- \$100,000	%			
3	\$100,001-\$500,000	%			
4	\$500,001+	%			
5	Total	100.00%			
ADDITIONAL COMMENTS					

Automated Payment Service

By signing below you are authorizing Targeted Lending Co., LLC to electronically remit to your bank account all earned commissions on funded loans.

	Company Name				
	Bank Name				
		Checking Account	Savings Account		
	Account Number				
	Bank ABA Number				
Corpora	ate Officer Authorizat				
		Signature		Title	Date

PLEASE ATTACH A VOIDED CHECK

Form (Rev. December 2014)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blan	k.						
.ge 2.	2 Business name/disregarded entity name, if different from above							
s on	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate single-member LLC				4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)			
Print or type c Instruction	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ► Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.			Exemption from FATCA reporting code (if any)				
i i i	Other (see instructions)				(Applies to accounts maintained outside the U.S.)			
ecific	5 Address (number, street, and apt. or suite no.)	Requester's name a		and address (optional)				
See Sp	6 City, state, and ZIP code							
	7 List account number(s) here (optional)	-						
Par	Taxpayer Identification Number (TIN)							
Enter v	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to	avoid	Social sec	curity numbe	r			
backup resider entities	withholding. For individuals, this is generally your social security number (SSN). However, it alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For oth, it is your employer identification number (EIN). If you do not have a number, see <i>How to g</i>	, for a er		-				
TIN on	page 3.	_	or					
Note: If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for			Employer	er identification number				
guidelines on whose number to enter.				-				
Part	II Certification							
Under	penalties of perjury, I certify that:							
1. The	number shown on this form is my correct taxpayer identification number (or I am waiting for	or a numbe	er to be is	sued to me)	; and			
Ser	not subject to backup withholding because: (a) I am exempt from backup withholding, or vice (IRS) that I am subject to backup withholding as a result of a failure to report all interestinger subject to backup withholding; and							
3. I an	a U.S. citizen or other U.S. person (defined below); and							
4. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA report	ting is corre	ect.					
because interest general instructions	cation instructions. You must cross out item 2 above if you have been notified by the IRS se you have failed to report all interest and dividends on your tax return. For real estate tranged paid, acquisition or abandonment of secured property, cancellation of debt, contributions lly, payments other than interest and dividends, you are not required to sign the certification on page 3.	nsactions, i s to an indiv	item 2 doe vidual reti	es not apply rement arra	r. For mo	rtgage (IRA),	and	
Sign Here	Signature of U.S. person ▶	Date ►						

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.